CLAIMS ONLY

Application Number 10/687700	**Filing Date**	
Applicant(s)		

03-17-05

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1			/			
2						
3			X			
4						
5			/			
6						
7						
8						
9						
10						
11						
12						
13						
14			/			
15						
16			X			
17						
18						
19			/			
20						
21						
22						
23			—			
24						
25						
26						
27						
28						
29			/			
30						
31						
32						
33						
34						
35			—			
36						
37						
38						
39						
40						
41						
42						
43						
44						
45						
46			—			
47						
48						
49						
50						
Total Indep			12			
Total Depend			77			
Total Claims			89			

03-17-05

CLAIMS		Indep	Depend	Indep	Depend	Indep	Depend
51				/			
52				/			
53							
54				X			
55							
56				/			
57				/			
58							
59							
60							
61							
62							
63							
64							
65				/			
66				X			
67							
68							
69							
70				/			
71							
72							
73							
74							
75							
76							
77							
78				/			
79				X			
80							
81							
82				/			
83							
84							
85							
86							
87				—			
88							
89							
90							
91							
92							
93				/			
94				/			
95							
96							
97							
98							
99				—			
100							
Total Indep							
Total Depend							
Total Claims							

CLAIMS ONLY

Application Number	Filing Date
10/687700	

Applicant(s)

03-17-05

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT			Indep	Depend	Indep	Depend	Indep	Depend
	Indep	Depend	Indep	Depend	Indep	Depend							
101							151						
102							152						
103							153						
104							154						
105							155						
106							156						
107							157						
108							158						
109							159						
110							160						
111							161						
112							162						
113							163						
114							164						
115							165						
116							166						
117							167						
118							168						
119							169						
120							170						
121							171						
122							172						
123							173						
124							174						
125							175						
126							176						
127							177						
128							178						
129							179						
130							180						
131							181						
132							182						
133							183						
134							184						
135							185						
136							186						
137							187						
138							188						
139							189						
140							190						
141							191						
142							192						
143							193						
144							194						
145							195						
146							196						
147							197						
148							198						
149							199						
150							200						
Total Indep							Total Indep						
Total Depend							Total Depend						
Total Claims							Total Claims						

see pg.1